



PO Box 8940, Fayetteville, AR 72703 Tel: 479-750-PINK (7465) Fax: 479-750-1189 E-mail: info@komenozark.org www.komenozark.org

Company Name: _____ Date: _____
(Print exactly as it should appear in publication)

Race Day Contact Name: _____ E-mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____ Tax ID: _____

Sponsorship Deadlines

January 15, 2010 - Sponsor Contract Form due to Komen to ensure company name and/or logo appear on Race T-shirt and Race registration form.

SPONSORSHIP LEVELS

- Founding Sponsor:  Presenting/Founding Sponsor Bronze: \$7,500
- Diamond Solitaire: \$30,000 Copper: \$5,000
- Presenting Sponsor:   Platinum: \$25,000 Pewter: \$2,500
- Gold: \$15,000 Crystal: \$1,000
- Silver: \$10,000

Sponsorship Contribution (check all that apply): Cash payment in the amount of _____ In-Kind donation described below

Quantity	Item Description	Fair Market Value Per Item	Total Fair Market Value of the Donation (col.1 x col. 3)

Total Fair Market Value of Sponsorship Contribution** _____

** Sponsor should contact its tax advisor to determine the tax deductible amount, if any, of the Sponsorship Contribution for federal income tax purposes.

Value of Sponsorship Contribution for Sponsorship Level (reflecting any reduction due to lack of necessity***): _____

*** For the sole purpose of determining the Sponsorship Level of the Sponsor, in the event an in-kind donation is not necessary for the Race(s), the Total Fair Market Value of the Donation may be reduced by one-half. Such reduction shall not have an impact on the fair market value or tax-deductible amount of the Sponsorship Contribution.

Cash Sponsorship Contribution Payment Method: Check payable to Komen Affiliate ACH transfer (instructions available on request)

Credit card payment: (a) Credit card type: Visa Mastercard (b) Name of Cardholder: _____

(c) Credit card number: _____ (d) Verification code (3 or 4 digits): _____ (e) Expiration date: _____

Sponsorship Contribution Payment Schedule:

Full amount of Sponsorship Contribution due and payable to "Komen Ozark Race for the Cure."
 (Please indicate if multiple invoices are needed)

Special Terms/Other: _____

By executing this Agreement, Sponsor agrees to be bound by the Standard Terms and Conditions as set forth on Page 2 of this agreement and all attachments hereto, which are hereby incorporated herein as set forth in their entirety. All terms set forth in all bold and capitalized letters herein shall have the meaning specifically designated above. The signatories to this Agreement hereby warrant that they have read and agree to the terms, conditions and provisions of this Agreement, including the Standard Terms & Conditions and schedules, and have full power and authority to sign for and bind their respective organizations.

Signature of Authorized Party of Sponsor

Print Name of Authorized Party of Sponsor

Signature of Komen Representative

Your support is sincerely appreciated. Proceeds benefit breast cancer research, education, screening, and treatment. Donations are tax deductible fully allowed by law. Susan G. Komen for the Cure® is a nonprofit organization with section 501(c)(3) status for tax purposes and is governed by a Board of Directors.

Please e-mail all logo art to logos@komenozark.org. Company logo must be submitted in EPS or PDF format with contract.

